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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

		Northern Distric	t of Illinois	
In re	Odonnis A Gallow	ау	Case No.	
	Debtor		Chantan	(If known)
			Chapter	Chapter 13
	DISCLOSURE (OF COMPENSATION	OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) compensation paid to me within	and Fed. Bankr. P. 2016(b), I cert one year before the filing of the p ehalf of the debtor(s) in contempl	ify that I am the attorney for the a	abovenamed debtor(s) and that
	For legal services, I have agree			\$4,000.00
	Prior to the filing of this statement	ent I have received		\$350.00
	Balance Due			\$3,650.00
2.	The source of the compensation	paid to me was:		
	✓ Debtor	Other (specify)		
3.	The source of the compensation	paid to me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share to members and associates or	the above-disclosed compensation fmy law firm.	n with any other person unless the	ey are
	I have agreed to share the a members or associates of r the people sharing in the co	bove-disclosed compensation witl ny law firm. A copy of the agreem mpensation, is attached.	h a other person or persons who a nent, together with a list of the na	are not ames of
5.	In return for the above-disclosed a. Analysis of the debtor's fi bankruptcy;	d fee, I have agreed to render leg- nancial situation, and rendering a	al service for all aspects of the badvice to the debtor in determining	ankruptcy case, including: gwhether to file a petition in
	b. Preparation and filing of	any petition, schedules, statemen	ts of affairs and plan which may l	be required;
	c. Representation of the del	otor at the meeting of creditors an	d confirmation hearing, and any a	adjourned hearings thereof;
	d. Representation of the de	otor in adversary proceedings and	d other contested bankruptcy mat	ters;
6.	By agreement with the debtor(s)	the above-disclosed fee does no	at include the following services:	
		CERTIFICAT	ION	
the c	certify that the foregoing is a cor lebtor(s) in this bankruptcy procei	nplete statement of any agreeme edings.	nt or arrangement for payment to	me for representation of
	8/16/2016		/s/ Elizabeth Placek	***************************************
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address. in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- Before signing this agreement, the attorney has received, \$ 350.00
 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 61.76 for expenses,
 leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 8/16/2016

Signed:

Debtor(s)

Odonnis/A

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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First Name		Galloway Case number (if knov .ast Name	vn)
	uestions for Reporting Purpose		
16. What kind of debts do you have?	16a. Are your debts primarily as "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily obtain money for a busine investment. No. Go to line 16c. Yes. Go to line 17.	v consumer debts? Consumer debts a ual primarily for a personal, family, or v business debts? Business debts ar ess or investment or through the opera	household purpose." e debts that you incurred to ation of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid tha funds will be available for distribution to unsecured creditors?	paid that funds will be available. No. Yes. e	7. Go to line 18. To you estimate that after any exempt property is ole to distribute to unsecured creditors?	excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	S500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be? Pant 7. Sign Below	☑ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	S500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
For you	and correct. If I have chosen to file under Chor 13 of title 11, United States Coproceed under Chapter 7. If no attorney represents me an fill out this document, I have obtood I request relief in accordance with I understand making a false state connection with a bankruptcy can both. 18 U.S.C. §§ 152, 1341	Signature o	ed, if eligible, under Chapter 7, 11,12, under each chapter, and I choose to me who is not an attorney to help me 11 U.S.C. § 342(b). s Code, specified in this petition. sing money or property by fraud in or imprisonment for up to 20 years,

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Fill in this infor	mation to identify your cas	se			
Debtor 1	Odonnis First Name	A Middle Name	Galloway Last Name		
Debtor 2 (Spouse, if filin		Middle Name	Last Name		
United States E	Bankruptcy Court for the:	Northern	District of Illinois		
Case number (if known)			(State)	and a second sec	
Official	Form 106De	<u>C</u>	**************************************		Check if this is a amended filing
Declara	tion About a	n Individual De	btor's Schedul	es	12/1:
If two married p	people are filing togeth	er, both are equally responsi	ble for supplying correct inf	ormation.	<u> Paranti mari na manana manana kati nga patama di kabapatan ka manana na manana na manana na manana na manana</u>
property by fra- 1519, and 3571.	ud in connection with a	file bankruptcy schedules or bankruptcy case can result	amended schedules. Makin in fines up to \$250,000, or im	g a false statement, concealing properi prisonment for up to 20 years, or both.	ty, or obtaining money or 18 U.S.C. §§ 152, 1341,
Did you p	ay or agree to pay som	eone who is NOT an attorney	to help you fill out bankrupt	tcy forms?	
☑ No					
Yes. I	Name of person		Attach Bankruptcy Pet Signature (Official Fon	ition Preparer's Notice, Declaration, and m 119).	
lledou	anitu af navium I da -t	a that I have us a SN			
that they a	are true and correct.	e that I have read the summa	market in the second se	ihis declaration and	
Signature of	nis Galloway of Debtor 1	/ VV / V	X Signature o	f Debtor 2	
Date <u>8/16/</u> MM/	/2016 /DD/YYYY		Date	DD/YYYY	

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	Odonnis	<u> </u>	Galloway	Case number (if known)
	First Name	Middle Name	Last Name	
Wit	hin 2 years before you f ditors, or other parties.	iled for bankruptcy, did yo	ou give a financial stateme	nt to anyone about your business? Include all financial institutions
	No Yes. Fill in the details bel	low.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	City S	itate Zip Code	····	
anie in anterior	•	Esp code		
12:	Sign Below			
bank	ruptcy case can result i			obtaining money or property by fraud in connection with a
	~	nis Galloway	mprisonment for up to 20 y	ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2
	🗴/s/ Odon	nis Galloway	mprisonment for up to 20 y	*
Did y	/s/ Odon Signature of Date 8/16/	inis Galloway f Debtor 1 2016	mprisonment for up to 20 y	Signature of Debtor 2 Date
(CONTRACTOR)	/s/ Odon Signature of Date 8/16/	inis Galloway f Debtor 1 2016	mprisonment for up to 20 y	Signature of Debtor 2
<u> </u>	/s/ Odon Signature of Date 8/16/ ou attach additional pa	inis Galloway f Debtor 1 2016	mprisonment for up to 20 y	Signature of Debtor 2 Date
	/s/ Odon Signature of Date 8/16// ou attach additional pa	f Debtor 1 2016 ges to Your Statement of	mprisonment for up to 20 y	Signature of Debtor 2 Date Juals Filing for Bankruptcy (Official Form 107)?
☑ N □ N Did y	/s/ Odon Signature of Date 8/16// ou attach additional pa	f Debtor 1 2016 ges to Your Statement of	mprisonment for up to 20 y	Signature of Debtor 2 Date Juals Filing for Bankruptcy (Official Form 107)?

Declaration, and Signature (Official Form 119).

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Galloway, Odonnis A Debtor(s)	Case No.
		Chapter. Chapter13
	VERIFIC	CATION OF CREDITOR MATRIX
	The above named Debtors hereby verify that	at the attached list of creditors is true and correct to the best of their knowledge.
Date:	8/16/2016	/s/ Galloway, Odonnis A
******		Galloway, Odonnis A Signature of Debtor

M.C.

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Deb	tor 1	Odonnis First Name	A Middle Name	Galloway Last Name	Case number (if known)	
16	Cale	culate the median family in				
		Fill in the state in which yo		Illinois		
		Fill in the number of people		minois		
		• •	•	1		640.744.00
	IGC.	Fill in the median family inc To find a list of applicable r also be available at the bar	nedian income amounts, g	of nousehold o online using the link sp	ecified in the separate instructions for this form. This list may	\$49,741.00
17.	How	v do the lines compare?				
	17a.	✓ Line 15b is less than of U.S.C. § 1325(b)(3).	r equal to line 16c. On the t 3o to Part 3. Do NOT fill o	op of page 1 of this form, out <i>Calculation of Dispose</i>	check box 1, Disposable income is not determined under 11 able Income (Official Form 122C-2).	
	17b.	Line 15b is more than 1325(b)(3). Go to Parcurrent monthly incom-	rt 3 and fill out Calculation	1 of this form, check box on of Disposable Incor	(2, Disposable income is determined under 11 U.S.C. § ne (Official Form 122C-2). On line 39 of that form, copy your	
Part	32 (Calculate Your Comm	itment Period Unde	r 11 U.S.C. §1325(I	b)(4)	
18.	Сор	y your total average mont	hly income from line 11.			\$1,197.00
19.	Com	uct the marital adjustmer mitment period under 11 U.S	nt if it applies. If you are m .C. § 1325(b)(4) allows you	arried, your spouse is no to deduct part of your sp	ot filing with you, and you contend that calculating the ouse's income, copy the amount from line 13.	
	19a.	If the marital adjustment do	es not apply, fill in 0 on line	19a.		-\$0.00
	19b.	Subtract line 19a from lin	ne 18.			\$1,197.00
20.	Calc	ulate your current monthl	y income for the year. Fo	llow these steps:		
	20a.	Copy line 19b.				\$1,197.00
		Multiply by 12 (the number	of months in a year).			x 12
	20b.	The result is your current m	nonthly income for the year	for this part of the form.		\$14,364.00
	20c.	Copy the median family inc	ome for your state and size	of household from line 16	Sc.	\$49,741.00
21.	How	do the lines compare?				
	Z	Line 20b is less than line 20c period is 3 years. Go to Part	Unless otherwise ordered4.	by the court, on the top of	of page 1 of this form, check box 3, The commitment	
		Line 20b is more than or equ commitment period is 5 years		wise ordered by the court	s, on the top of page 1 of this form, check box 4, The	
Part	4: S	Sign Below		MANAGEMENT OF THE		
		By signing here, I declare ur	nder penalty of perjury that t	he information on this sta	atement and in any attachments is true and correct.	
			~ 1		^	
		/s/ Odonnis Gallowa	y/////////////////////////////////////	×		
		Signature of Debtor 1		•	Signature of Debtor 2	
		Date 8/16/2016 MM/DD/YYYY			Date	
		If you checked 17a, do NOT If you checked 17b, fill out Fo			at form, copy your current monthly income from line 14 above.	



Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Page 13 of 71 Document Fill in this information to identify your case: United States Bankruptcy Court for the: Northern District of: Illinois Case number (if known) Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Check if this is an Chapter 13 amended filing Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/15 The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case — and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Identify Yourself **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): Odonnis 1. Your full name First name First name Write the name that is on your government-issued Middle name Middle name picture identification (for example, your driver's Galloway license or passport Last name Last name Bring your picture Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) identification to your meeting with the trustee. 2. All other names you have used in the last First name First name 8 years Middle name Middle name Include your married or maiden names. Last name Last name First name First name Middle name Middle name Last name Last name 3. Only the last 4 digits XXX - XX- 8180 XXX - XXof your Social OR Security number or

Taxpayer Identification number (ITIN)

federal Individual

9 xx - xx-

9 xx - xx-

Odonni Case 16-26535 ADoc 1 Filed 086118/136 Entered 08/18/116 1111303:14 Desc Main Debtor 1 Page 14 of 71 Documetht ende **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 4113 W Maypole Ave Apt: Rear Number Street Number Street 60624 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08/18/16 Entered 08/18/16 Abb 03:14 Desc Main

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Tell the Court About Your Bankruptcy Case Part 2: 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Odonni Case 16-26535 ADoc 1 Filed 08/18/16 Entered 08/18/16 (14):03:14 Desc Main Debtor 1 Document Page 16 of 71 Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Number Street that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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You must check one:

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Explain Your Efforts to Receive a Briefing About Credit Counseling Part 5:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

I have a mental illness or a mental Incapacity.

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Odonni Case 16-26535 ADoc 1 Filed 08618/16 Entered 08/18/16 11:03:14 Desc Main Debtor 1 Page 18 of 71 Documetht me **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded No. and administrative Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Odonnis Galloway Signature of Debtor 2 Signature of Debtor 1 Executed on 8/18/2016 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 086181616 Entered 08148166 (1818) 03:14 Desc Main

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For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

orrect.	iat the ime	ination i	Tillo conlocation	The will the pendente
/s/ Elizabeth Placek Signature of Attorney for Debtor		Date	8/18/2016 MM / DD / YYY	<u>Y</u>
Elizabeth Placek				
Printed name				
Semrad Law Firm				
Firm name				
20 S. Clark Street				
Street				
28th Floor				
Chicago	Illinois			60603
City	State			Zip Code
Contact phone <u>3124477838</u>		E	mail address	eplacek@semradlaw.com
Bar number		5	State	

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Fill in this information to identify your case:				
Debtor 1	Odonnis	Α	Galloway	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				

Check if this is ar
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

our original forms, you must fill out a new Summary and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$951.00
1c. Copy line 63, Total of all property on Schedule A/B	\$951.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$4,100.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$26,659.00
Your total liabilities	\$30,759.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$1,100.00
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$900.00

Filed 08618/136 Entered 08/18/16 (161:03:14 Desc Main Odonni Case 16-26535 ADoc 1 Debtor 1 Page 21 of 71 **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Vour debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,197.00 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Copy the following special categories of claims from Part 4, line 6 of Schedule DF.	
From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$4,100.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00
9g. Total. Add lines 9a through 9f.	\$4,100.00

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106A/B amended filing Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? **✓** No. Go to Part 2 Yes. Where is the property? What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.1 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. Other City State Zip Code Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: If you own or have more than one, list here: What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: 1.2 Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home Number Street Describe the nature of your ownership Investment property interest (such as fee simple, tenancy by Timeshare the entireties, or a life estate), if known. City State Zip Code Check if this is community property Who has an interest in the property? Check one. (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another

property identification number:

Other information you wish to add about this item, such as local

Debtor 1	Odonni Case 16-26535 A Doc 1 First Name Middle Name	Filed 08618/136 Entered 08/18/116 Document Page 23 of 71	Malio 3:14 Desc Main
1.3 Stre	et address, if available, or other description	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
Nun		Land Investment property Timeshare Other	Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is community property (see instructions)
		Other information you wish to add about this item, property identification number: all of your entries from Part 1, including any entries fre.	or pages
Do you ov you own th 3. Cars, va	at someone else drives. If you lease a vehicle, al ns, trucks, tractors, sport utility vehicles, motorc	in any vehicles, whether they are registered or not? Ir so report it on Schedule G: Executory Contracts and Unexp cycles	
3.1	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?
		Check if this is community property (see	

Debtor 1	Odonni Case 16-26535 ADoc 1	Filed 0861/841/6 Entered 0841/8416	6 (ilkal) (ilk	c Main		
	First Name Middle Name	Document Page 24 of 71				
3.3	Make	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:			
	Model: Year:	Debtor 1 only	· ·	nims Secured by Property.		
	Approximate mileage:		Creations vino riave ola	and Goodred by Froporty.		
	··· <u> </u>	Debtor 2 only	Current value of the	Current value of the		
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
		At least one of the debtors and another				
		Check if this is community property (see instructions)				
3.4	Make	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put			
	Model: Year:	Debtor 1 only	the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.			
	Approximate mileage:		Creations vino riave ola	and Goodred by Froporty.		
	··· <u>——</u>	Debtor 2 only	Current value of the	Current value of the		
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
		At least one of the debtors and another				
		Check if this is community property (see instructions)				
	Yes					
4.1	Make Model:	Who has an interest in the property? Check one.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D</i> :			
	Year:	Debtor 1 only	Creditors Who Have Claims Secured by Property.			
	Approximate mileage:	Debtor 2 only	O	0		
	Other information:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?		
	Other Information.	At least one of the debtors and another		——————		
		Check if this is community property (see				
		instructions)				
4.2	Make	Who has an interest in the property? Check	Do not deduct secured cl	•		
	Model:	one.	the amount of any secure			
	Year:	Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.		
	Approximate mileage:	Debtor 2 only	Current value of the	Current value of the		
	Other information:	Debtor 1 and Debtor 2 only	entire property?	portion you own?		
		At least one of the debtors and another		·		
		Check if this is community property (see instructions)				
5. Add	the dollar value of the portion you own for a	II of your entries from Part 2, including any entries f	or pages			
you ha	ve attached for Part 2. Write that number her	e	>			

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08618/46 Entered 08/418/116 (Abd) 03:14 Desc Main
First Name Document Page 25 of 71 **Describe Your Personal and Household Items**

Part 3:

Do you own or h	ave any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods	s and furnishings	
Examples: Major app	bliances, furniture, linens, china, kitchenware	
☐ No		
Yes. Describe	Used Furniture	\$250.00
7. Electronics Examples: Television No	s and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music	
Yes. Describe	(1)Cellphone (1)TV	\$300.00
8. Collectibles of va	lue	
	and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; bin, or baseball card collections; other collections, memorabilia, collectibles	
✓ No		
Yes. Describe		
	norts and hobbies notographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes ks; carpentry tools; musical instruments	
	to, carporary tools, musical instruments	
V No ::		
Yes. Describe		
10. Firearms Examples: Pistols, rif	les, shotguns, ammunition, and related equipment	
✓ No		
Yes. Describe		
11. Clothes Examples: Everyday No	clothes, furs, leather coats, designer wear, shoes, accessories	
Yes. Describe	Used Clothes	\$400.00
12. Jeweiry Examples: Everyday gold, silve	iewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, er	
✓ No		
Yes. Describe		
13. Non-farm anima Examples: Dogs, ca		
✓ No		
Yes. Describe		
14 Any other nerson	nal and household items you did not already list, including any health aids you did not list	
✓ No	inal and reducerious from you did not diready not, including any neathr also you did not list	
Yes. Describe		
15. Add the dollar va	alue of all of your entries from Part 3, including any entries for pages you have attached	#050.00
	number here	\$950.00

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Describe Your Financial Assets

Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes Pre Paid Debit Card with Walmart 17.1. Checking account: \$1.00 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Yes 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No Name of entity % of ownership: Yes. Give specific information about them

Debt	or 1	Odonni Case 16 First Name	<u>-26535</u>	ADOC 1 Middle Name	Filed 08618/1/6 Document	<u>Entered</u> 08/4/8/16 /1/4/03 Page 27 of 71	3: <u>14 Desc Main</u>
20.	Nege Non-	otiable instruments ind -negotiable instrumen	clude persona	al checks, cash	gotiable and non-negoti niers' checks, promissory n nsfer to someone by signin	able instruments otes, and money orders.	
	Reti Exar	information about them rement or pension and the properties of the pension and the pensi			03(b), thrift savings accour	nts, or other pension or profit-sharing plar	ns
		Yes. List each	Type of acco		Institution name:		
			Pension plar	n:			
			IRA:				
			Retirement a	account:			
			Keogh:				
			Additional ad	ccount:			
			Additional ad	ccount:	-		
	Your Exar com		eposits you ha	ave made so th	nat you may continue servic public utilities (electric, gas Institution name:	e or use from a company , water), telecommunications	
		Yes	Electric:				
			Gas:				
			Heating oil:				
			Security dep	oosit on rental u	ınit:		
			Prepaid rent	t:			
			Telephone:		·		
			Water:				
			Rented furni	iture:			
			Other:				
23.	$\overline{}$	uities (A contract for a	a periodic pa	yment of mone	ey to you, either for life or for	r a number of years)	
			Issuer name	e and descriptio	on:		

Debt	or 1	Odonni Case 16 First Name	<u>6-26535</u>	ADOC 1 Middle Name	Filed 08¢1/8//1/6	Entered 08/18/18	6 Abbi03: <u>14</u>	Desc Main
24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).								
	✓	No Institution	n name and d	escription. Sep	arately file the records of a	ny interests.11 U.S.C. § 521(c):	
25.		ısts, equitable or fu ercisable for your be		ts in property	(other than anything lis	ted in line 1), and rights or	powers	
		No Yes. Describe						
26.					and other intellectual productions and licenses			
27.	Lic	Yes. Describe enses, franchises, a	and other ge	eneral intangik	oles			
21.						ngs, liquor licenses, professio	nal licenses	
Mor	ney	or property owe	ed to you?	?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Тах	refunds owed to yo	u					
	V	No						
		Yes. Give specific inf					Federal:	\$0.00
		about them, inc you already file and the tax yea	d the returns	er			State:	\$0.00
		and the tax yea					Local:	\$0.00
29.		nily support <i>mples:</i> Past due or lur	mp sum alimo	ny, spousal sup	pport, child support, mainte	nance, divorce settlement, pro	operty settlement	
	V	No					Alimony:	\$0.00
	Ш	Yes. Give specific inf	ormation				•	
							Maintenance:	\$0.00
							Support:	\$0.00
							Divorce settlement:	\$0.00
							Property settlement:	\$0.00
30.			, disability ins	urance paymer	nts, disability benefits, sick made to someone else	pay, vacation pay, workers' co	mpensation,	
	V	No						
		Yes. Describe						

Deb	tor 1	Odonni Case 16 First Name	6-26535	ADOC 1 Middle Name	Filed 08618/13/6 Document	<u>Entered</u> 08/418/6 Page 29 of 71	L6 (AkAL::03: <u>14</u>	<u>Desc</u>	Main
31.		rests in insurance proples: Health, disabi		ırance; health		edit, homeowner's, or rente	r's insurance		
		No Yes. Name the insura of each policy and lis		/	Company name:		Beneficiary:		Surrender or refund value:
32.	If you		of a living trus		pmeone who has died ceeds from a life insurance	policy, or are currently entitle	d to receive		
33.	Clai	ms against third pa			u have filed a lawsuit or more claims, or rights to sue	ade a demand for paymer	nt		
	ō	No Yes. Describe						_	
34.	to s	er contingent and of the continued an	unliquidated	claims of ev	very nature, including co	unterclaims of the debtor	and rights	¬ _	
35.	✓	financial assets yo No Yes. Describe	u did not alre	eady list					
36.			-			es for pages you have att			\$1.00
Part	5:	Describe Any B	susiness-R	elated Pro	operty You Own or H	ave an Interest In. Lis	st any real estate	in Paı	rt 1.
37.	Do y	ou own or have an	ıy legal or eq	uitable intere	est in any business-relate	d property?			
		No. Go to Part 6. Yes. Go to line 38.						portion Do no	ent value of the on you own? ot deduct secured claims emptions
38.	✓	ounts receivable or No Yes. Describe	commission	s you alread	dy earned				
39.	Exar	ce equipment, furn mples: Business-rela No Yes. Describe			nodems, printers, copiers, fa	x machines, rugs, telephone	es, desks, chairs, electro	onic devi	ces

		Odonni Case 16 First Name		Middle Name	Filed 08618/136 Document	Page 30 of 71	⊾6 @kabi∙03: <u>14</u> D	esc N	1ain	•
40.	0. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade									
	✓	No								
		Yes. Describe								-
41.	Inve	entory								
	✓	No								
		Yes. Describe] —		-
42.	Inte	rests in partnershi	ps or joint v	entures				_		
	✓									
		Yes. Give specific			Name of entity:		% of ownership:			
		information about								
		them								
40.6										
43. C		omer lists, mailing	lists, or othe	r compilation	ns					
	Ш	Yes. Do your lists inc	clude persona	lly identifiable	information (as defined in	11 U.S.C. § 101(41A))?				
		☐ No								
		Yes. Descri	be							
44	Δην	business-related p	roperty you	did not alrea	dv liet					
44.	_		roperty you	ulu ilot ali cat	uy iist					
	_	Yes. Give specific information								
		illionnation		•						
				•						
				;	_				_	
			•			for pages you have attach				
										=
Part	6:	If you own or have an	interest in far	mland, list it in	al Fishing-Related P Part 1.	roperty You Own or H	nave an interest in	١.		
46.	Do	you own or have a	ny legal or ed	quitable inter	est in any farm- or comm	ercial fishing-related prop	erty?			
	✓	No. Go to Part 7.							current value of the ortion you own?	
		Yes. Go to line 47.							o not deduct secured	
									aims	
47.	Fare	m animals						0	r exemptions	
→ 1.		<i>mpl</i> es: Livestock, pou	ıltry, farm-rais	ed fish						
	V	No								
	\dashv	Yes. Describe						1		
	ш	. 55. 2 5501150								•

Deb	tor 1	Odonni Case 16 First Name	<u>6-26535</u>	ADOC 1	Filed 08¢1/8//1		Entered_08/18/16 /14:03: <u>14</u> age 31 of 71	Desc	<u>Main</u>
48.	Cro	ps-either growing	or harvested	l	Document		age of or 71		
	✓	No							
		Yes. Describe							
49.	Farı	m and fishing equi	pment, imple	ements, machi	inery, fixtures, and to	ols of	f trade		
	✓	No							
		Yes. Describe						_	
50.	Farı	m and fishing supp	lies, chemica	als, and feed					
	✓	No							
		Yes. Describe						_	
51.	Any	farm- and comme	rcial fishing-r	related proper	ty you did not alread	y list			
		No							
		Yes. Describe						_	
			-				r pages you have attached		
for Pa	art 6.	Write that number	here				>		
Dort	7.	Dosoribo All Br	onarty Vall	. Own or Ha	wo an Interest in	That	t You Did Not List Above		
Part 53		you have other pro				IIIai	t fou blu not List Above		
00.		mples: Season tickets			iot airoddy iiot i				
	✓	No							
		Yes. Give specific							
		information							
								_	
54. A	dd th	e dollar value of all	l of your entr	ies from Part	7. Write that number	here .		•	
Part		List the Totals							
55. F	Part 1	: Total real estate,	line 2				>		
56. p	art 2	total vehicles, line	5						
57. P	art 3	: Total personal and	d household	items, line 15	\$950	00			
58. P	art 4	: Total financial ass	ets, line 36		\$1.00	١			
59. F	Part 5	i: Total business-re	elated proper	ty, line 45			<u></u>		
60. F	Part 6	6: Total farm- and fi	shing-relate	d property, lin	e 52				
61. F	Part 7	: Total other prope	erty not listed	d, line 54					
62. 1	otal	personal property.	Add lines 56 t	through 61	\$951	00			+ \$951.00
							Copy personal property to	otal ▶	
62 T	otal c	of all property on S	chedule A/P	Add line 55 + 1	line 62				\$951.00
UU. I	Juan C	or an property off o	onedule A/D.	. ,	UZ				1

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Galloway Debtor 1 Odonnis First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106C amended filing Schedule C: The Property You Claim as Exempt 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known). For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount. Part 1: Identify the Property You Claim as Exempt Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. Amount of the exemption you claim Brief description of the property and line
Current value of Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$250.00 description: **Used Furniture** $\overline{\mathbf{v}}$ \$250.00 I ine from 100% of fair market value, up to any Schedule A/B: applicable statutory limit Brief 735 ILCS 5/12-1001(a) \$400.00 description: **Used Clothes** \$400.00 Line from 100% of fair market value, up to any Schedule A/B: 11 applicable statutory limit Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Debtor 1 Odonni Case 16-26535 A Doc 1 Filed 08618/16 Entered 08/18/16 (1/18/16) 3:14 Desc Main

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Part 2: **Additional Page** Brief description of the property and line Current value of Amount of the exemption you claim Specific laws that allow exemption on Schedule A/B that lists this property the portion you Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Pre Paid Debit Card with Brief \$1.00 **✓** description: Walmart \$1.00 Line from 100% of fair market value, up to any Schedule A/B: 17 applicable statutory limit 735 ILCS 5/12-1001(b) Brief \$300.00 \checkmark (1)Cellphone (1)TV description: \$300.00 Line from 100% of fair market value, up to any Schedule A/B: 07 applicable statutory limit

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 106D amended filing Schedule D: Creditors Who Have Claims Secured by Property Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known). Do any creditors have claims secured by your property? No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims 2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for Column A Column B Column C each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much

as possible, list the claims in alphabetical order according to the creditor's name.

Amount of claim

Do not deduct the

value of collateral.

Value of collateral

that supports

this claim

Unsecured

portion If any

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: District of Illinois Northern (State) Case number (If known) Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims Do any creditors have priority unsecured claims against you? No. Go to Part 2. ✓ Yes. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total **Priority** Nonpriority claim amount amount 2.1 Illinois Department of Healthcare \$4,100.00 \$4,150.00 (\$50.00) Last 4 digits of account number Priority Creditor's Name When was the debt incurred? 509 S 6th St Number Street As of the date you file, the claim is: Check all that apply. Contingent 62701 Springfield Illinois Unliquidated City State 7in Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim relates to a community debt intoxicated Is the claim subject to offset? **✓** No Other. Specify Yes

Filed 08618/16 Entered 08/18/16 114 Desc Main Odonni Case 16-26535 ADoc 1 Debtor 1 Page 36 of 71 Documetht et not be a second and the List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 ACCEPTANCE NOW \$6,875.00 Last 4 digits of account number 0642 Nonpriority Creditor's Name 5501 Headquarters Dr When was the debt incurred? 11/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent 75024 <u>Plano</u> Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Installment Loan Other. Specify_ Is the claim subject to offset? **V** No Yes ATG CREDIT \$107.00 Last 4 digits of account number 9671 Nonpriority Creditor's Name 1700 W CORTLAND ST STE 2 When was the debt incurred? 9/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60622 Unliquidated Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT **V** Is the claim subject to offset? **V** No Other. Specify DATA Yes Bank of America \$600.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 26078 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Greensboro North Carolina 27420 Unliquidated City Zip Code State Who incurred the debt? Check one. ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify_

Debts to pension or profit-sharing plans, and other similar debts

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning w	ith 4.5, followed by 4.6, and so forth.	Total claim
4.4	City of Chicago - Parking and red Light Tickets Nonpriority Creditor's Name Department of Revenue - PO Box 88292 Number Street Chicago Illinois 60680 City State Zip Code	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated	\$3,000.00
M.S.	City State Zip Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? ✓ No Yes CMRE. 877-572-7555	Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ✓ Other. Specify Driver License Number: G400-6419-0187	£297.00
4.5	Nonpriority Creditor's Name 3075 E IMPERIAL HWY STE Number Street BREA California 92821 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? No Yes	When was the debt incurred? 9/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Collection; Collecting for ORIGINAL CREDITOR: MEDICAL PAYMENT Other. Specify DATA	\$287.00
4.6	CREDENCE RESOURCE MANA Nonpriority Creditor's Name 17000 DALLAS PKWY STE 20 Number Street DALLAS Texas 75248 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? Yes	Last 4 digits of account number 6361 When was the debt incurred? 7/1/2015 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify CREDITOR: AT T	\$2,236.00

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lims - Continuation Page

I GILZ	Tour NONF MONTH Office Cured Claims - Continue	ation i age	
	After listing any entries on this page, number them beginning w	vith 4.5, followed by 4.6, and so forth.	Total claim
4.7	CREDIT ACCEPTANCE	- Last 4 digits of account number 0882	\$6,397.00
_	Nonpriority Creditor's Name		
	1250 Peachtree St Ne Number Street	When was the debt incurred?5/1/2015	
		As of the date you file, the claim is: Check all that apply.	
	Atlanta Cannia 20000	Contingent	
	Atlanta Georgia 30309 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Repo & Surrender to vehicle	
	✓ No	<u> </u>	
	Yes		
4.0			
4.8	CREDIT UNION 1 Nonpriority Creditor's Name	Last 4 digits of account number	\$2,334.00
	200 E CHÁMPAIGN AVE	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	RANTOUL Illinois 61866	·	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	= '	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify case number: 13M1-136386	
	✓ No		
	Yes		
4.9	PLS	- Last 4 digits of account number	\$880.00
	Nonpriority Creditor's Name 800 Jorie Blvd 2nd Floor		
	Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Oak Brook Illinois 60523	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	✓ Other. Specify payday loan	
	Is the claim subject to offset?		
	✓ No		
	☐ Vos		

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i dila	Tour NONFRIORITT Offsecured Claims - Continual			
	After listing any entries on this page, number them beginning w	rith 4.5, followed by 4.6, and so forth).	Total claim
4.10	SECURITY CREDIT SERVIC	Last 4 digits of account number	8877	\$1,224.00
	Nonpriority Creditor's Name 2653 W OXFORD LOOP	When was the debt incurred?	12/1/2014	
	Number Street	-		
		As of the date you file, the claim is	: Check all that apply.	
	OXFORD Mississippi 38655	Contingent		
	City State Zip Code	Unliquidated		
	Who incurred the debt? Check one. Debtor 1 only	Disputed		
	Debtor 2 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 1 and Debtor 2 only	Student loans		
	<u>'</u>	Obligations arising out of a sepa		
	At least one of the debtors and another	that you did not report as priority		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing	• •	
	Is the claim subject to offset?	001 Collection; C CREDITOR:	Collecting for ORIGINAL WHYNOTLEASING	
		Other. SpecifyLLC-SE	EARS ROEBU	
	Yes			
4.11	SENTRY CREDT Nonpriority Creditor's Name	Last 4 digits of account number _	4509	\$449.00
	2809 Grand Ave	When was the debt incurred?	6/1/2013	
	Number Street	As of the date you file, the claim is	: Check all that apply	
		Contingent	. Oneck all that apply.	
	Everett Washington 98201	Unliquidated		
	City State Zip Code Who incurred the debt? Check one.	= '		
	Debtor 1 only	Disputed	alaim.	
	Debtor 2 only	Type of NONPRIORITY unsecured	ciaim:	
	Debtor 1 and Debtor 2 only	Student loans		
	At least one of the debtors and another	Obligations arising out of a sepa that you did not report as priority		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing		
	Is the claim subject to offset?		llecting for ORIGINAL	
	No	Other. Specify <u>CREDITOR: 08</u>		
	Yes			
4.12	SOUTHWEST CREDIT SYSTE			\$270.00
4.12	Nonpriority Creditor's Name	Last 4 digits of account number _	8482	φ270.00
	5910 W PLANO PKWY STE 10 Number Street	When was the debt incurred? _	4/1/2016	
	Number Street	As of the date you file, the claim is	: Check all that apply.	
	DIANG T TTOO	Contingent		
	PLANO Texas 75093 City State Zip Code	Unliquidated		
	Who incurred the debt? Check one.	Disputed		
	Debtor 1 only	Type of NONPRIORITY unsecured	claim:	
	Debtor 2 only	Student loans		
	Debtor 1 and Debtor 2 only	Obligations arising out of a sepa	ration agreement or divorce	
	At least one of the debtors and another	that you did not report as priority		
	Check if this claim relates to a community debt	Debts to pension or profit-sharing	g plans, and other similar debts	
	Is the claim subject to offset?		Collecting for ORIGINAL	
	✓ No	Other. Specify CREDITO	OR: COMCAST	
	☐ Yes			

Filed 08/18/16 Entered 08/18/16 (14):03:14 Desc Main Debtor 1 Odonni Case 16-26535 ADOC 1 Page 40 of 71 Document Market Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.13 \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 219554 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Kansas City Missouri 64121

	City	State	Zip Code	Disputed	
	Who incurred the deb	ot? Check one.		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only			Student loans	
	Debtor 1 and Debtor	•		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the de	ebtors and another		Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim	relates to a com	munity debt	✓ Other. Specify Phone Bill	
	Is the claim subject to No Yes	offset?		_	
4.14	TMobile Nonpriority Creditor's Na P.O. Box 742596 Number Street	ame		Last 4 digits of account number	\$1,000.00
	Cincinnati City Who incurred the deb Debtor 1 only Debtor 2 only Debtor 1 and Debtor At least one of the de Check if this claim Is the claim subject to Yes	r 2 only ebtors and another a relates to a com	45274 Zip Code munity debt	 □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Phone Bill 	

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08618/16 Entered 08618/16 (1841) 03:14 Desc Main First Name Document Page 41 of 71

Part 3: List Others to Be Notified About a Debt That You Already Listed

AT&t			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
Do Doy 5014			Line 4.6 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Po Box 5014 Number Street			
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Carol Stream City	Illinois State	60197 Zip Code	Last 4 digits of account number 6361
SEARS		p	
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
OO POV 1000			Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
PO BOX 1990 Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
TEMPE	Arizona	85280	Last 4 digits of account number 8877
City	State	Zip Code	
NORDSTROM FSE	В		On which entry in Part 1 or Part 2 did you list the original creditor?
			Line 4.11 of (Check one): Part 1: Creditors with Priority Unsecured Claim
PO BOX 6555 Number Street			Part 2: Creditors with Nonpriority Unsecured
ENGLEWOOD	Colorado	80155	Claims Last 4 digits of account number 4509
City	State	Zip Code	
Vest Suburban Med	dical Center		
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
B Erie Ct			Line 4.5 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Oak Park	Illinois	60302	Last 4 digits of account number 7405
City	State	Zip Code	
Comcast Name			On which entry in Part 1 or Part 2 did you list the original creditor?
varrie			
11621 E. Marginal W	Vay # 5		Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Seattle	Washington	98168	Last 4 digits of account number 8482
City	State	Zip Code	
HARRIS & HARRIS	SLTD		On which entry in Dout 4 or Dout 2 did you liet the entrying smalltane
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
111 W JACKSON BI	LVD S-400		Line 4.4 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
CHICAGO	Illinois	60604	Last 4 digits of account number
City	State	Zip Code	
Fichter, Paul B			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			<u> </u>
450 E 22NDST#250)		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Lombard	Illinois	60148	Last 4 digits of account number
City	State	Zip Code	

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08618/46 Entered 08/418/116 (Abd) 03:14 Desc Main
First Name Document Page 42 of 71

Part 4: Add the Amounts for Each Type of Unsecured Claim

		ertain types of unsecured claims. This information is for ach type of unsecured claim.	or sta	ntistical reporting purposes only. 2	8 U.S.C. §159.
				Total claims	
Total claims from Part 1	6a. Dome	estic support obligations.	6a.	\$4,100.00	
	6b. Taxes	and certain other debts you owe the government	6b.	\$0.00	
	6c. Claims	s for death or personal injury while you were intoxicated	l 6c.	\$0.00	
		. Add all other priority unsecured claims. Write that nt here.	6d.	\$0.00	
	6e. Total.	Add lines 6a through 6d.	6e.	\$4,100.00	
				Total claims	
Total claims from Part 2	6f. Stude	ent loans	6f.	\$0.00	
	•	ations arising out of a separation agreement or divorce ou did not report as priority claims	e 6g.	\$0.00	
	6h. Debts debts	to pension or profit-sharing plans, and other similar	6h.	\$0.00	
		. Add all other nonpriority unsecured claims. Write that nt here.	6i.	\$26,659.00	
	6j. Total.	Add lines 6f through 6i.	6j.	\$26,659.00	

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern United States Bankruptcy Court for the: District of Illinois (State) Case number (If known) Check if this is an Official Form 106G amended filing Schedule G: Executory Contracts and Unexpired Leases Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

State what the contract or lease is for

Person or company with whom you have the contract or lease

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors 12/15 Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) □ No Yes Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) No. Go to line 3. Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? _____Fill in the name and current address of that person. Yes. In which community state or territory did you live? ____ Name of your spouse, former spouse, or legal equivalent Number Street Citv State Zip Code In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply:

Zip Code

Schedule D, line

Schedule E/F, line

Schedule G, line

Wilson, Krystle

Street

State

Name

Number

Citv

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis First Name Middle Name Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name An amended filing Middle Name Last Name A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number MM / DD / YYYY (If known) Official Form 106I Schedule I: Your Income 12/15 Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment **Debtor 1** Debtor 2 1. Fill in your employment information. **Employment status** Employed Employed If you have more than one ✓ Not Employed Not Employed job, attach a separate page with Occupation information about additional employers. Employer's name Include part time, seasonal, **Employer's address** Number Street Number Street self-employed work. Occupation may include student or homemaker, if it applies. Zip Code Zip Code How long employed there? Part 2: **Give Details About Monthly Income** Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 2 or For Debtor 1 non-filing spouse

Official Form 106I Schedule I: Your Income page 1

3.

\$0.00

+ \$0.00

\$0.00

2. List monthly gross wages, salary, and commissions (before all payroll

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

deductions.) If not paid monthly, calculate what the monthly wage would be.

Entered 08/18/16 11:03:14 Debtor 1 Odonni Case 16-26535 ADoc 1 <u>Filed 08¢1/8//1/6</u> First Name Documentame Page 46 of 71 For Debtor 2 or For Debtor 1 non-filing spouse \$0.00 Copy line 4 here 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. \$0.00 5b. Mandatory contributions for retirement plans 5b. \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. \$0.00 5e. Insurance 5f. Domestic support obligations 5f. \$0.00 5g. 5a. Union dues \$0.00 5h. Other deductions. Specify: 5h. \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. \$0.00 6. 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$0.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. \$0.00 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce \$0.00 8c settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 Specify: 8g. 8g. Pension or retirement income \$0.00 8h. Other monthly income. Specify: William Trucking- Cash Job 8h. \$1,100.00 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,100.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$1,100.00 \$1,100.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$1,100.00 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Check if this is: Debtor 2 (Spouse, if filing) First Name Middle Name Last Name An amended filing A supplement showing post-petition chapter 13 United States Bankruptcy Court for the: Northern District of Illinois expenses as of the following date: (State) Case number (If known) MM / DD / YYYY Official Form 106J Schedule J: Your Expenses 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Your Household 1. Is this a joint case? ✓ No. Go to line 2 Yes. Does Debtor 2 live in a separate household? No Yes. Debtor 2 must file Official Forms 106J-2, Expenses for Separate Household of Debtor 2. 2. Do you have dependents? Do not list Debtor 1 and Yes. Fill out this information for Dependent's relationship to Dependent's Does dependent live Debtor 2. each dependent Debtor 1 or Debtor 2 with you? age 3. Do your expenses include **✓** No expenses of people other ☐ Yes yourself and your dependents? Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date. Include expenses paid for with non-cash government assistance if you know the value of Your expenses such assistance and have included it on Schedule I: Your Income (Official Form B 106I.) 4. The rental or home ownership expenses for your residence. Include first mortgage payments and \$200.00 any rent for the ground or lot. 4. 4. If not included in line 4: 4a. Real estate taxes \$0.00 4a 4b. Property, homeowner's, or renter's insurance \$0.00 4b. 4c. Home maintenance, repair, and upkeep expenses \$0.00 4c.

4d

\$0.00

4d. Homeowner's association or condominium dues

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08/18/16 Entered 08/18/16 (18/16) (18/18/16)

Document Page 48 of 71 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6a. Electricity, heat, natural gas \$40.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$50.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$255.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning \$50.00 9. 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$35.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$120.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	Odonni Case 16-2653	5 ADOC 1	Filed 08618/13/6	Entered 08/18/16 (14.14)	03: <u>14 Desc M</u>	ain
21. Other.	Specify:		Document de la Document	Page 49 of 71	21	\$0.00
			_			
22. Calcu	late your monthly expenses.					\$900.00
22a. A	dd lines 4 through 21.					\$0.00
22b. C	opy line 22 (monthly expenses f	or Debtor 2), if ar	ny, from Official Form 106J	-2		\$900.00
22c. A	dd line 22a and 22b. The result i	s your monthly ex	xpenses.		22.	
23. Calcul	ate your monthly net income	·-				
23a. C	opy line 12 (your combined mor	nthly income) fron	n Schedule I.		23a	\$1,100.00
23b. C	opy your monthly expenses from	line 22 above.			23b	\$900.00
	ubtract your monthly expenses fr		income.			\$200.00
1	The result is your monthly net inc	come.			23c	
24. Do yo	u expect an increase or decre	ease in your exp	penses within the year af	er you file this form?		
For e	xample, do you expect to finish p	paying for your ca	ar loan within the year or do	you expect your		
mortg	gage payment to increase or dec	crease because of	of a modification to the term	s of your mortgage?		
✓ N	lo					
	es					
	Explain here:					

Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Case 16-26535 Fill in this information to identify your case: Debtor 1 Odonnis Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name Northern United States Bankruptcy Court for the: District of Illinois (State) Case number (If known) Check if this is an Official Form 106Dec amended filing **Declaration About an Individual Debtor's Schedules** 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? **✓** No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Yes. Name of person Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

Signature of Debtor 2

MM/DD/YYYY

/s/ Odonnis Galloway

Signature of Debtor 1

MM/DD/YYYY

Date 8/18/2016

Case 16-26535 Doc 1 Filed 08/18/16 Entered 08/18/16 11:03:14 Desc Main Fill in this information to identify your case: Odonnis Debtor 1 Galloway First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an Official Form 107 amended filing Statement of Financial Affairs for Individuals Filing for Bankruptcy 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married ✓ Not married During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1: Dates Debtor 1 lived Debtor 2: **Dates Debtor 2 lived** there there Same as Debtor 1 Same as Debtor 1 3900 W Flournoy St 12/2014 From Number Street Number Street 02/2016 60624 Chicago Illinois City State Zip Code City State Zip Code Same as Debtor 1 Same as Debtor 1 From Number Street Number Street To City State Zip Code City State Zip Code 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08/118/146 Entered 08/118/116 114 Desc Main

Part	First Name Middle	Document		оу шер (ладоор) С. <u>174 — DCS</u>	oc man
4.	Did you have any income from employmer Fill in the total amount of income you receive activities. If you are filing a joint case and you No Yes. Fill in the details.	ent or from operating a busi d from all jobs and all business	ses, including part-time		s?
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips ✓ Operating a business	\$6600.00	Wages, commissions, bonuses, tips Operating a business	
	For last calendar year: (January 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$16158.00	Wages, commissions, bonuses, tips Operating a business	
	For the calendar year before that: (January 1 to December 31, 2014) YYYYY	Wages, commissions, bonuses, tips Operating a business	\$15000.00	Wages, commissions, bonuses, tips Operating a business	
li b a	Did you receive any other income during to include income regardless of whether that incomenefit payments; pensions; rental income; intuit you have income that you received togethesist each source and the gross income from each of the your secretary. No Yes. Fill in the details.	ome is taxable. Examples of ot erest; dividends; money collec er, list it only once under Debto	her income are alimony; child ted from lawsuits; royalties; ar r 1.	nd gambling and lottery winnings	
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	\$194 from Link for 3mt	\$582.00		
	For last calendar year: (January 1 to December 31,				

For the calendar year before that: (January 1 to December 31, 2014

YYYY

Debtor 1 Odonni Case 16-26535 ADoc 1 Filed 08618146 Entered 08618166 Activ03:14 Desc Main Page 53 of 71

Part 3:	List (Certain F	Payments	s You Made Be	fore You Filed for B	ankruptcy		
6. Ar	e either [Debtor 1's	or Debtor	2's debts primaril	y consumer debts?			
	-			Debtor 2 has prima household purpose	•	onsumer debts are defined in	11 U.S.C. § 101(8) as "incurr	ed by an individual primarily
	Dı	uring the 90	O days befor	re you filed for bank	ruptcy, did you pay any cred	ditor a total of \$6,425* or more	9?	
	Г	No. Go	to line 7.					
		to	tal amount	you paid that credito	or. Do not include payment	or more in one or more paym s for domestic support obligat an attorney for this bankruptc	ions, such as	
	* 5	Subject to a	adjustment o	on 4/01/19 and ever	y 3 years after that for case	s filed on or after the date of a	adjustment.	
✓	Yes. Do	ebtor 1 or	Debtor 2 d	or both have prim	arily consumer debts.			
	Du	uring the 90	O days befor	re you filed for bank	ruptcy, did you pay any cred	ditor a total of \$600 or more?		
	V	No. Go	to line 7.					
	Ė			ch creditor to whom	you paid a total of \$600 or	more and the total amount yo	u naid	
		th	at creditor.	Do not include payr		t obligations, such as child su		
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Credite	or's Name						Mortgage
	Numbe	er Street						Car
	INUITIDE	ei Stieet						Credit card Loan repayment
								Suppliers or
	City		State	Zip Code				vendors
								Other
	Credit	or's Name						☐ Mortgage ☐ Car
	Numbe	er Street						Car Card Credit card
								Loan repayment
								Suppliers or
	City		State	Zip Code				vendors
					-			Other Martage
	Credite	or's Name						☐ Mortgage ☐ Car
	Numbe	er Street						Credit card
								Loan repayment
	C:+		Ctoto	7in Carla				Suppliers or
	City		State	Zip Code				vendors Other

Odonni Case 16-26535 ADoc 1 Filed 086118/136 Entered 08/138/146 134:03:14 Desc Main Debtor 1 Document Page 54 of 71 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Dates of Amount you still Reason for this payment Total amount payment paid owe Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment paid payment owe Include creditor's name Insider's Name Number Street Zip Code City State Insider's Name Number Street City State Zip Code

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08/18/146 Entered 08/18/146 Akabi 03:14 Desc Main
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t all such matters, including personal injury o	ases, small claims actions, divor	rces, collection suits, par			
putes.					
No Yes. Fill in the details.					
	Nature of the case	Court or agen	ncy		Status of the case
Case title Credit Union 1 vs Odonnis Galloway	Civil	Cook County C	Circuit Cour	t	✓ Pending On appeal
Case number 13M1136386		50 West Washi Number Street			Concluded
		Illinois 6	Chica 60602 State	ago Zip Code	
Case title		2,		p	Pending
		Court Name			On appeal
Case number		Number Street			Concluded
		City	State	Zip Code	
Check all that apply and fill in the details below No. Go to line 11.				·	ized, or levied?
Check all that apply and fill in the details below		repossessed, foreclos		·	Value of the
Check all that apply and fill in the details below No. Go to line 11.	Describe the pr	repossessed, foreclos		hed, attached, se	
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.	Describe the positive of the p	repossessed, foreclos roperty Vehicle was Repo		hed, attached, se	Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne	Describe the pr	repossessed, foreclos roperty Vehicle was Repo		hed, attached, se	Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street	Describe the position of the p	repossessed, foreclos roperty Vehicle was Repo		hed, attached, se	Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne	Describe the property was Property was	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed.		hed, attached, se	Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street Center Tower Atlanta Georgia 30	Describe the property was	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed. as garnished.	sed, garnis	hed, attached, se	Value of the property
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street Center Tower Atlanta Georgia 30	Describe the property was	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed. as garnished. as attached, seized, or le	sed, garnis	hed, attached, se	Value of the property \$6397
CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street Center Tower Atlanta Georgia 3C City State Zip City of Chicago - Parking and red Light	Describe the property was Describe the property was Describe the property was book of the proper	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed. as garnished. as attached, seized, or leveroperty	sed, garnis	Date 11/2015	Value of the property \$6397
Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street Center Tower Atlanta Georgia 30 City State Zip City of Chicago - Parking and red Light Creditor's Name Department of Revenue - PO Box 88292	Describe the property was Prope	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed. as garnished. as attached, seized, or leveroperty ted and impound	sed, garnis	Date 11/2015	Value of the property \$6397 Value of the property
Yes. Fill in the information below. CREDIT ACCEPTANCE Creditor's Name 1250 Peachtree St Ne Number Street Center Tower Atlanta Georgia 30 City State Zip City of Chicago - Parking and red Light Creditor's Name	Describe the property was property was Describe the property was Described to the property w	repossessed, foreclos roperty Vehicle was Repo appened as repossessed. as foreclosed. as garnished. as attached, seized, or leveroperty ted and impound	sed, garnis	Date 11/2015	Value of the property \$6397 Value of the property

Deb	tor 1		ed 08418/416 Entered 08/18/116 (141:0	3: <u>14 Desc</u>	Main
11.			ocume name Page 56 of 71 red a debt?	off any amounts f	rom your
		No Yes. Fill in the details.	eu a ueur:		
	-		Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name			
		Number Street	Last 4 digits of account number: XXXX-		
		City State Zip Code			
12.		nin 1 year before you filed for bankruptcy, was any eliver, a custodian, or another official?	of your property in the possession of an assignee for	the benefit of cred	litors, a court-appointed
	✓	No Yes			
Part	t 5:	List Certain Gifts and Contributions			
13.	Wi	No	u give any gifts with a total value of more than \$600 pe	er person?	
		Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			
		Person to Whom You Gave the Gift			
		Number Street			
		City State Zip Code Person's relationship to you			

Seminal Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street S
Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State Zip Code No Yes. Fill in the details. Describe what you contributed Charity's Name Number Street City State Zip Code Describe what you contributed City State Zip Code No Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule ArB: Property. List Certain Payments or Transfers 6. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Date payment or transfer was made Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00
Gifts or contributions to charities that total more than \$600 Chairly's Name Number Street City State Zip Code Nithin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other gambling? No Yes. Fill in the details. Describe what you contributed Chairly's Name Number Street City State Zip Code Nothin 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule ArB: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred payment or transfer was made Sentrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attomey's Fee - 350.00
Gifts or contributions to charities that total more than \$600 Charity's Name Number Street City State Zip Code Nimber Street City State Zip Code Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Date payment or transfer was made 20 South Clark Street 28th Floor Number Street Date 2016 Attorney's Fee - 350.00
Charity's Name Number Street
Number Street City State Zip Code State Zip Code
Number Street City State Zip Code State Zip Code
City State Zip Code
City State Zip Code
City State Zip Code
Semirad Law Firm Semirad Law Fired Street Stree
List Certain Losses
Seminal Law Firm No Yes. Fill in the details. Description and value of any property transferred Date payment or transfer was made Oscur Clark Street 28th Floor Number Street
gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.
gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.
Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance coverage for the loss Include any insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance coverage for the loss Include the amount that insurance has paid. List pending insurance coverage for the loss Include the amount that insurance has paid. List pending insurance coverage for the loss Include the amount that insurance has paid. List pending insurance laims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance has paid. List pending insurance laims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance has paid. List pending insurance laims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance has paid. List pending insurance laims on line 33 of Schedule A/B: Property. Date of your loss Include the amount that insurance laims on line 33 of Schedule A/B: Property. Date of your loss Include the amount has been detailed. List pending insurance laims on line 33 of Schedule A/B: Property. Date of your loss. Date of your loss. Date of your loss. Date of you
Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00 Date payment or transfer was made Attorney's Fee - 350.00
Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred Person Who Was Paid 20 South Clark Street 28th Floor Number Street Date payment or transfer was made Attorney's Fee - 350.00 OB/2016
Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred payment or transfer was made Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00 08/2016
pending insurance claims on line 33 of Schedule A/B: Property. List Certain Payments or Transfers 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred payment or transfer was made Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00
Property. Property: Property: Property:
Cart 7: List Certain Payments or Transfers
Mithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No
6. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred payment or transfer was made Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00
16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. No Yes. Fill in the details. Description and value of any property transferred payment or transfer was made Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00
Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00 Attorney's Fee - 350.00
Semrad Law Firm Person Who Was Paid 20 South Clark Street 28th Floor Number Street Attorney's Fee - 350.00 08/2016
Person Who Was Paid 20 South Clark Street 28th Floor Number Street
Number Street
Chicago Illinois 60606
City State Zip Code
Email or website address
Person Who Made the Payment, if Not You
reison who made the rayment, if not rou
Person Who Was Paid
Person Who Was Paid Number Street
Number Street
Number Street City State Zip Code

Debtor 1 Odonni Case 16-26535 ADOC 1 Filed 08/18/146 Entered 08/18/146 Akt 103:14 Desc Main

)	Within 1 year before you filed for bankruptcy, did you deal with your creditors or to make payments to Do not include any payment or transfer that you listed on	your creditors?		property to anyone v	who promised to h
	√ No				
	Yes. Fill in the details.				
		Description and value of any prop	erty transferred		mount of paymer
				payment or transfer was	
				made	
				muuc	
	Person Who Was Paid	_			
	1 CISOTI WITO Was I ald				
	Number Street	-			
		_			
		_			
	City State Zip Code				
	ransfers that you have already listed on this statement. No Yes. Fill in the details.				
		Description and value of any		property or payment	s Date transfe
		property transferred	received or o	lebts paid in	was made
			exchange		
		_			
	Person Who Received Transfer	_			
	Person Who Received Transfer Number Street	_ _			
		- -			
		_ _ _			
	Number Street	- - -			
	Number Street City State Zip Code	- - - -			
	Number Street	 			
	Number Street City State Zip Code Person's relationship to you	- - - -			
	Number Street City State Zip Code	- - -			
	Number Street City State Zip Code Person's relationship to you	- - - -			
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer				
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer				
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street				
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code				
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code				
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you	vou transfer any property to a self-settle	ed trust or similar o	levice of which you a	ure a beneficiary
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code	you transfer any property to a self-settle	ed trust or similar o	device of which you a	are a beneficiary?
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did (These are often called asset-protection devices.)	you transfer any property to a self-settle	ed trust or similar o	device of which you a	are a beneficiary?
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)	you transfer any property to a self-settle	ed trust or similar o	device of which you a	ure a beneficiary?
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did (These are often called asset-protection devices.)	you transfer any property to a self-settle	ed trust or similar o	device of which you a	are a beneficiary?
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)	you transfer any property to a self-settle		device of which you a	·
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)			device of which you a	
	City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did (These are often called asset-protection devices.) No Yes. Fill in the details.			device of which you a	Date transfe
	Number Street City State Zip Code Person's relationship to you Person Who Received Transfer Number Street City State Zip Code Person's relationship to you Within 10 years before you filed for bankruptcy, did These are often called asset-protection devices.)			device of which you a	Date transfe

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Filed 08618/16 Entered 08/18/16 11:03:14 Desc Main

Page 59 of 71 Documetht et al Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20.	or tr Inclu	nin 1 year before you filed for ansferred? de checking, savings, money ma peratives, associations, and othe	arket, or other finar	icial accounts					
		No							
	Ц	Yes. Fill in the details.		Last 4	digits of accour	t Type	of account or	Date	Last balance
				numbe	-		ument	account was closed, sold, moved, or transferred	before closing or transfer
		Person Who Was Paid		XXXX-			Checking avings		
		Number Street				□ M □ B	loney market rokerage		
		City State	Zip Code			По	Other		
		Person Who Was Paid		XXXX-			Checking avings		
		Number Street					floney market rokerage		
		City State	7: 0 - 1 -				Other		
21.	Do y	City State You now have, or did you have	Zip Code within 1 year be	fore you file	d for bankruptc	y, any safe dep	posit box or other deposi	tory for securities	s, cash, or other
	valu	ables?	·	•	·			·	
		Yes. Fill in the details.							
				Who else	had access to	t?	Describe the conter	nts	Do you still have it?
		Name of Financial Institution		Name			-		☐ No ☐ Yes
		Number Street		Number	Street		-		_
				City	State	Zip Code	-		
		City State	Zip Code						
22.	✓	e you stored property in a sto No Yes. Fill in the details.	rage unit or place	other than	your home with	iin 1 year befo	re you filed for bankrupte	cy?	
	_			Who else	had access to i	t?	Describe the conter	nts	Do you still have it?
		Name of Storage Facility		Name			-		☐ No ☐ Yes
		Number Street		Number	Street		-		
				City	State	Zip Code	-		
		City State	Zip Code						

Debtor '	First Name Middle Name	Filed 08618/46 Entered 08/4 Document Page 60 of 71	. 8/116	<u>n</u>
Part 9:	Identify Property You Hold or Contro	ol for Someone Else		
23. Do	you hold or control any property that someor	e else owns? Include any property you borro	owed from, are storing for, or hold in tru	st for someone.
∠	No Yes. Fill in the details.			
	•	Where is the property?	Describe the contents	Value
	Owner's Name	Number Street		
	Number Street			
		City State Zip Code		
	City State Zip Code			
Part 10	Give Details About Environmental I	nformation		
For the	purpose of Part 10, the following definitions apply:			
	Environmental law means any federal, state, or local hazardous or toxic substances, wastes, or material including statutes or regulations controlling the clear	into the air, land, soil, surface water, groundwater		
	Site means any location, facility, or property as definor used to own, operate, or utilize it, including dispose	•	w own, operate, or utilize it	
	Hazardous material means anything an environmer toxic substance, hazardous material, pollutant, con		substance,	
	all notices, releases, and proceedings that you know			
порол	an nonces, releases, and processings that you have	azou, regaracos er men ure, cocumou.		
24. Ha	s any governmental unit notified you that you	may be liable or potentially liable under or in	violation of an environmental law?	
✓	No Yes. Fill in the details.			
	100. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of
				notice
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State Zip Code		
	City State Zip Code	, ,		
a s	·			
25. Ha	eve you notified any governmental unit of any r	elease of hazardous material?		
ľ	No Yes. Fill in the details.			
_		Governmental unit	Environmental law, if you know it	Date of notice
				notice
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State Zip Code		
	City State Zip Code			

Debt	or 1	Odonni Case 16 First Name	<u>-26535</u>	ADOC 1 Middle Name	Filed 0861/8/1/6 Document	Entered 08/1 Page 61 of 71		Ŀi₀3: <u>14</u>	Desc Mai	<u>n</u>
26.	Hav	e you been a party i	n any judicia	al or administra	ative proceeding under	any environmental la	w? Include	e settlements	and orders.	
		No Yes. Fill in the details								
	ш	res. I ill III the details	•		Court or agency		Nature o	f the case		Status of the
		Case title								case
					Court Name					Pending On appeal
		Case number			Number Street					Concluded
					City State	Zip Code				
Part	11:	Give Details Ab	out Your E	Business or	Connections to A	ny Business				
27.	With	nin 4 years before yo	ou filed for b	oankruptcy, did	you own a business o	r have any of the follo	wing conn	ections to an	y business?	
		A sole proprietor	r or self-empl	oyed in a trade,	profession, or other activ	rity, either full-time or pa	art-time			
		A member of a li A partner in a pa	•	company (LLC	c) or limited liability partne	ership (LLP)				
		An officer, direct		ing executive of	a corporation					
		An owner of at le	east 5% of the	e voting or equit	y securities of a corporat	ion				
		No. None of the above			ls below for each busines	6				
	ш	res. Crieck all triat ap	ipiy above ari	iu iii iii tile uetaii		s. ature of the business		Employer Id	lentification nu	mber Do not
									ial Security nur	nber or ITIN.
		Business Name						EIN:		
		Number Street			Name of accou	Intant or bookkeeper		Dates busin	ess existed	
		City	State	Zip Code		•		From	To	
					Describe the n	ature of the business			lentification nu ial Security nur	
		Business Name						EIN:		
		Number Street						Dates busin	ess existed	
					Name of accou	intant or bookkeeper			To	
		City	State	Zip Code				FIOIII	To	
					Describe the n	ature of the business			lentification nu ial Security nur	
		Business Name						EIN:		
		Number Street						Dates busin	ess existed	
		0	01-1-	7: 0 :	Name of accou	intant or bookkeeper		From	То	
		City	State	Zip Code				. 10111	10	

Debtor 1		<u>08618/1/6 Entered</u> 08/1/8/11 :ume:nt:- Page 62 of 71	.6 ஃஃல்3: <u>14 Desc Main</u>
	thin 2 years before you filed for bankruptcy, did you gieditors, or other parties.	-	your business? Include all financial institutions,
Ė	Yes. Fill in the details below.		
		Date issued	
	Name	MM/DD/YYYY	
	Number Street		
	City State Zip Code		
Part 12:	Sign Below		
and	ve read the answers on this Statement of Financial Afticorrect. I understand that making a false statement, ckruptcy case can result in fines up to \$250,000, or improver the company of t	oncealing property, or obtaining money or	r property by fraud in connection with a
	Signature of Debtor 1	Signature of	Debtor 2
	Date 8/18/2016	Date	
✓	you attach additional pages to Your Statement of Fina No Yes you pay or agree to pay someone who is not an attorn	-	kruptcy (Official Form 107)?
	No	, 12 1121p you iiii out bulliu upidy formo.	
	Yes. Name of person		Bankruptcy Petition Preparer's Notice, on, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	<u> </u>	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B 203 (12/94)

In

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Northern District of Illinois

re	Odonnis A Galloway		Case No.	
_	Debtor		<u> </u>	(If known)
			Chapter	Chapter 13
	DISCLOSURE OF C	OMPENSATION	OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed compensation paid to me within one ye rendered or to be rendered on behalf or	ar before the filing of the p	etition in bankruptcy, or agreed	to be paid to me, for services
	For legal services, I have agreed to ac	cept		\$4,000.0
	Prior to the filing of this statement I ha	ve received		\$350.0
	Balance Due			\$3,650.0
2.	The source of the compensation paid to	o me was:		
	Debtor	Other (specify)		
3.	The source of the compensation paid to	o me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the abomembers and associates of my la		n with any other person unless th	ney are
	I have agreed to share the above-d members or associates of my law the people sharing in the compensa	firm. A copy of the agreem		
5.	In return for the above-disclosed fee, I a. Analysis of the debtor's financia bankruptcy;	-		
	b. Preparation and filing of any per	tition, schedules, statemen	ts of affairs and plan which may	be required;
	c. Representation of the debtor at	the meeting of creditors an	d confirmation hearing, and any	adjourned hearings thereof;
	d. Representation of the debtor in	adversary proceedings and	d other contested bankruptcy ma	atters;
6.	By agreement with the debtor(s), the al	pove-disclosed fee does no	ot include the following services:	
		CERTIFICAT	TION	
	certify that the foregoing is a complete debtor(s) in this bankruptcy proceedings		ent or arrangement for payment	to me for representation of
	8/18/2016		/s/ Elizabeth Placek	
	Date		Signature of Attorney	
			Semrad Law Firm	
			Name of law firm	

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In re:	Galloway, Odonnis A	Case No	
	Debtor(s)		
		Chapter.	Chapter13
	VERIFICATIO	N OF CREDITOR MAT	RIX
	The above named Debtors hereby verify that the a	ttached list of creditors is true a	nd correct to the best of their knowledge.
Date:	8/18/2016	/s/ Galloway, Odonr	
		Galloway Odonnis	Δ

Signature of Debtor

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ACCEPTANCE NOW 5501 Headquarters Dr ATTN: Acceptance Now Customer Service Plano , TX 75024 USA

CREDENCE RESOURCE MANA PO Box 2268 Southgate , MI 48195 USA

AT&t Po Box 5014 Carol Stream , IL 60197 USA

SECURITY CREDIT SERVIC 2653 W OXFORD LOOP OXFORD , MS 38655 USA

SEARS PO BOX 1990 TEMPE , AZ 85280 USA

SENTRY CREDT 2809 Grand Ave Everett , WA 98201 USA

NORDSTROM FSB PO BOX 6555 ENGLEWOOD , CO 80155 USA

CMRE. 877-572-7555 3075 E IMPERIAL HWY STE BREA , CA 92821 USA

West Suburban Medical Center 3 Erie Ct Oak Park , IL 60302 USA

SOUTHWEST CREDIT SYSTE 5910 W PLANO PKWY STE 10 PLANO , TX 75093 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO , IL 60622 USA

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CREDIT ACCEPTANCE 1250 Peachtree St Ne Center Tower Atlanta , GA 30309 USA

City of Chicago - Parking and red Light Tickets Department of Revenue - PO Box 88292 Chicago , IL 60680 USA

HARRIS & HARRIS LTD 111 W JACKSON BLVD S-400 CHICAGO , IL 60604 USA

PLS 800 Jorie Blvd 2nd Floor Oak Brook , IL 60523 USA

CREDIT UNION 1 200 E CHAMPAIGN AVE RANTOUL , IL 61866 USA

Fichter, Paul B 450 E 22NDST#250 Lombard , IL 60148 USA

Bank of America Po Box 26078 Greensboro , NC 27420 USA

Sprint P.O. Box 219554 Kansas City , MO 64121 USA

TMobile P.O. Box 742596 Cincinnati , OH 45274 USA

Illinois Department of Healthcare 509 S 6th St Springfield , IL 62701 USA

Harris, Elsielee D 509 S 6th St Springfield , IL 62701 USA